

VOPA ADVISOR

VOLUME 3

FALL 2004

EDITION 2



MISSION OF VOPA

Through zealous and effective advocacy and legal representation to:

- ◇ *Protect and advance the legal, human, and civil rights of persons with disabilities;*
- ◇ *Combat and prevent abuse, neglect and discrimination;*
- ◇ *Promote independence, choice and self determination by persons with disabilities in the Commonwealth.*

MESSAGE FROM THE EXECUTIVE DIRECTOR Colleen Miller

Across the Commonwealth, people with disabilities face enormous challenges and difficulties—ranging from outright cruelty and abuse to the indignity of being treated differently just because of their disability. Unfair treatment is hard to tolerate, and often hard to understand. There is much more of it in the world than we will be able to address in our lifetimes. But that does not mean that we should stop trying to make the world a safer and more just place for all to live, regardless of our abilities or disabilities. Each problem we resolve makes it a little easier to face the rest.

VOPA is here to do our part in the Herculean task of making the world safer and more just for people with disabilities. But, clearly, we cannot do it all. VOPA is a legal rights agency, and some of the problems faced by people with disabilities are not “legal” problems. Even those problems that can be addressed through the law are far too numerous for VOPA to solve.

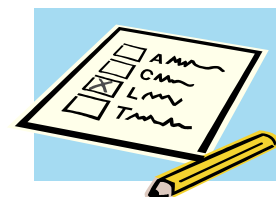
That is why, each year, we pick just a few narrow issues where we hope we can actually make a difference. We call those our “focus areas,” and we use them to select which cases we will accept and which ones, reluctantly, we will decline.

The focus areas are selected based on input from the community, from our advisory councils, and from our Board. The focus areas are further refined after we consider our staffing resources, and after we review the state of the law in each area. It is a painstaking planning process, but through it we hope to be using our limited resources in the wisest manner. These focus areas may be viewed on our website at www.vopa.state.va.us.

This year, public input was widely sought through a web-based feedback form as well as through two focus groups that were held in Roanoke and Arlington. Both the Protection and

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VOTING RIGHTS CAMPAIGN



VOPA has a unique role in ensuring voting rights for voters with disabilities. The Help America Vote Act of 2002 authorized funding for VOPA and other protection and advocacy systems across the country to “ensure the full participation in the electoral process for individuals with disabilities, including registering to vote, casting a vote and access to polling sites.”

Hoping to end discrimination against voters who have disabilities, VOPA monitored polling locations on Election Day, as part of its 2004 Voting Accessibility Campaign, to ensure that voters with disabilities had an equal opportunity to vote and have assurances that they could cast a private ballot.

If you or someone you know had problems in voting because of a disability, please contact VOPA at (800) 552-3962.

VOPA WORKING TO HELP AMERICA VOTE

Julie Kegley, Esq. and Steven Traubert, Esq.

The Virginia Office for Protection and Advocacy (VOPA) is pleased to announce the creation of a multimedia version of the Americans with Disabilities Act (ADA) Checklist for Polling Places.

Based on the document prepared by the U.S. Department of Justice, this project incorporates graphics, text, audio, and Macromedia Flash technology to create an interactive tool for training individuals and agencies involved in the surveying and monitoring of polling places. The Checklist for Polling Places will then be available in audio (which has already been produced by VOPA), and an audio/visual version

in PDF, CD-ROM, web presentation, PC, Mac, and DVD formats, with clear and rich navigation, using visible and audible mouse movements, interactive buttons, and graphical simulations.

VOPA plans to make this presentation available to the Virginia Centers of Independent Living to enhance the training we have provided to polling site surveyors, as well as the Virginia Board of Elections and local registrars for Virginia's 2,292 polling places, who could use the tool to assist in understanding the requirements of the ADA and the Help America Vote Act.

We also hope that if other P&As and Centers for Independent Living find the tool useful, we will be able to distribute it, either on CD-ROM or by hosting it on our website, thereby making the tool useful to as many advocates and agencies as possible.

The Checklist is available for your use on our webpage at www.vopa.state.va.us.

For more information, please contact Steven Traubert at traubesm@vopa.state.va.us or Julie Kegley at kegleyjc@vopa.state.va.us.

STATE REACHES OUT TO NEEDY CHILDREN



Children with disabilities and children from low income families will soon learn more about special services that are available to help them. In response to a lawsuit filed by VOPA, the state's Department of Medical Assistance Services (DMAS) has agreed to notify 400,000 children in Virginia about these special medical services that are available to them. These are children who are entitled to receive medical and other services under a federal Medicaid program, known as Early and Periodic Screening, Diagnosis and Treat-

ment (EPSDT). As a part of the program, the state is required to seek out all children who may be entitled to the services and be certain that they know about the services and know how to access them.

In the suit, the Virginia Office for Protection and Advocacy (VOPA) alleged that DMAS may have failed to fulfill its responsibilities to notify children about the program, based on complaints received by VOPA. Without admitting to the allegation, DMAS agreed to notify some 400,000 children about the Medicaid program and the wide range of services that might be available to them under it. In addition, DMAS announced its intention to develop a new member handbook to include specific, detailed and understandable information on the EPSDT program. DMAS committed to train Department of Social Services' personnel on the program and to conduct a training session for all Medicaid case managers and service fa-

cilitators on the topic of EPSDT. Finally, DMAS stated that it will revise its EPSDT informational brochure by October 2004, and send it to all EPSDT eligible persons.

Medicaid is a federal health care program making low or no cost services available to people with disabilities and children in poverty. As a participant in the federal Medicaid program, Virginia is required to offer certain children early and periodic screening, diagnosis and treatment services, which are intended to provide comprehensive health care and health-related services to eligible children. Eligible children with disabilities can receive any health care services or treatment necessary to cure, lessen or help their disabilities, under EPSDT, and the state has an obligation under

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PROPOSED DEPARTMENT OF VETERANS AFFAIRS ACCESS POLICY MIRRORS SETTLEMENT AGREEMENT ACHIEVED BY VOPA

Paul Buckley, Esq.

On June 10, 2004, two senior representatives of the Department of Veterans Affairs (DVA), Joan S. Van Riper, MS RN, Director, National Veteran Customer Service and Advocacy Program, and Richard R. Robinson, JD, Deputy Assistant General Counsel, joined by a Staff Attorney for the Virginia Office for Protection and Advocacy (VOPA), participated in a presentation at the National Association of Protection and Advocacy Systems (NAPAS) annual conference.

patient rights presentations and staff training. VOPA gained this unprecedented access as part of a



VOPA was asked to participate because we are the only Protection and Advocacy (P&A) system with an agreement granting access to a DVA hospital. The agreement permits VOPA to post information on the services we offer; how we can be contacted; requires the inclusion of VOPA brochures in patient admissions materials; and allows VOPA representatives to conduct

settlement agreement that it achieved in a case against the Hunter Holmes McGuire Department of Veterans Affairs Medical Center in Richmond (photograph above).

At the NAPAS conference, the DVA Customer Service and Patient Advocacy representative presented an overview of the DVA's internal ad-

vocacy program and an outline of a proposed policy addressing access to DVA facilities by all P&A systems. The requirements of the policy mirror the settlement agreement that VOPA achieved in its case against McGuire VA hospital. The representative from the DVA General Counsel's Office presented an overview of the McGuire litigation from the DVA's perspective and emphasized the limitations on P&A access authority with regard to DVA facilities. The VOPA Staff Attorney's presentation covered the history of the litigation against McGuire VA hospital, the challenges of access and advocacy in a DVA hospital, and the areas where DVA facilities interface with state systems and agencies which present opportunities for advocacy.

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the program to seek out eligible children and tell them about the wide range of necessary services that may assist them.

"We are pleased with the plans that DMAS has announced. Hopefully, these steps will help hundreds of thousands of kids to get the services they need to live happy and healthy lives," Colleen Miller, Executive Director of the Virginia Office for Protection and Advocacy said. "DMAS has demonstrated a true commitment to serving these children, and we are grateful for that. We support the promises that they have made to Virginia's most vulnerable children."

SPEAKERS BUREAU

Our staff is available to provide presentations and/or training sessions on disability-related rights that are addressed by our current goals and focus areas.

VOPA can also provide an exhibit and/or materials for fairs, conferences, etc.

Please contact us at 1-800-552-3962 or via e-mail at general.vopa@vopa.virginia.gov to request a speaker, exhibit, or materials.

COURTESY GUIDELINES: WHAT SHOULD YOU DO WHEN YOU MEET A PERSON WHO IS DEAF AND BLIND?

Deaf-blind people are individuals. You can't lump them together as a group any more than you can attribute a class of characteristics to any particular individual. The keys to interacting effectively and sensitively with people who are deaf and blind, as with all people, are courtesy, flexibility and common sense. What follows is, therefore, a list of suggestions you may want to consider and apply to specific situations.

1. When you approach a deaf-blind person, let him or her know with a gentle touch on the hand that you are near. Touching the hand is less startling than a touch on the back or arm. If you touch a person's hands gently and slide your hands underneath his or her own hand, the person will know that you want to communicate.
2. Identify yourself every time you meet. Even if a deaf-blind person is partially sighted or usually recognizes the touch of your hands, it is always nice to be reassured. Identifying yourself will also save possible confusion and embarrassment, yours and his or hers. Perhaps you can work out a simple but special signal for quickly identifying yourself, such as a name sign.
3. Don't ever play the "who am I" game. It is extremely aggravating. "Do you remember me? We met at... [don't you] remember?" is also irksome. Assume your deaf-blind companion does not remember you, then react with pleasant surprise if he or she does.
4. When talking with a deaf-blind friend, do not tease by poking, tickling, jostling, etc. unless he or she knows what's coming. Have you ever been startled by an unexpected slap on the back or a poke in the ribs? Hearing and vision warn us of what is coming from our immediate surroundings or further away.
5. Be flexible about communication. Your deaf-blind companion may not fit your preconceived idea of how deaf-blind people communicate, so be open, not dogmatic. Don't make assumptions about the "right" modality, primary language, or fluency. If you don't know him or her, start with tactile, medium speed, modified ASL. This is the accepted "default" medium. As your companion responds, you can naturally modify your communication media and speed to make the conversation more comfortable for you both.
6. Respect his or her "person." Communication takes longer and is often very difficult for us, but it is essential to our dignity. Do not move a person's hand for him or her, place a person into a chair, grip a person's thumb when signing (so that his or her hand does not slip off) or otherwise treat any person like an object.
7. If a deaf-blind person is alone in a room, let him or her know if you will be going in and out; whether you have come in to stay for a while; or when you are leaving. We all need to know when we are alone (and have our privacy) and when we are not. And we all need time to be alone and fully relax.
8. If you are in a deaf-blind person's home, do not be tempted to use your vision to snoop or spy.
9. Think of partial vision as useful but totally unreliable. Whenever possible, describe what you are talking about clearly and, rather than pointing at an object, let a deaf-blind companion touch it.
10. Don't make assumptions about what your deaf-blind companion may or may not be able to hear. Ambient noise, other environmental factors, or even a person's ability to concentrate on a particular day can affect his or her ability to utilize limited hearing effectively.
11. Guide a deaf-blind person's hand to objects by leading with yours. Let his or her hand rest lightly on the back of your hand as you move it slowly toward what you want him or her to touch. When you make contact, slowly slip your hand out from underneath.
12. If you visit a deaf-blind person's home, be sure to leave things as they are. Poor vision makes it easy to spill or knock things over. Half-open doors or cupboards can be a particularly painful annoyance.
13. Don't worry about "messiness." Doing things without sight may lead to a system for organization which varies from

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your definition of the “norm,” but none of us should make judgments about one another’s particular styles of putting things away.

14. Remember to communicate about what you are doing. Don’t just move another person, or hand him or her objects without an explanation. A person who is deaf and blind will know how to reach for an object, or cooperate by stepping back if he or she understands what is going on. If you must move a person suddenly for reasons of safety, explain the reasons for your actions afterward.
15. Consider expense when planning outings or thinking of gifts.
16. Offer help if it seems appropriate to do so. It hurts to always have to ask. For the same reason, try to be unobtrusive and subtle whenever you offer assistance.
17. Ask a deaf-blind companion to join you in your tasks. Assume he or she is as willing to walk as anyone of the same age, as willing and able to carry things as anyone of the same size and build. Silly as it is, we sometimes think of blind-deaf people as fragile and we hesitate to ask them to walk far or help us carry things.

Unless the deaf-blind person has a complicating disability, he or she will probably enjoy both the exercise and the opportunity to join you and to share life’s chores with you. On the other hand, some people with dual sensory losses have been forced into a seden-

tary lifestyle by well-meaning but uninformed caregivers. If this is the case, start slowly until your companion has had an opportunity to get in shape.

18. Do let a person who is deaf and blind think independently. Give him or her options. Provide as much information as possible, then let the person make decisions for him- or herself. Don’t make assumptions about whether a person is hungry, whether he or she wants you to cut up the meat on the plate, etc. Allow a companion an adequate amount of time to make up his or her mind about an activity or your offer of assistance. Then, if your companion requests your help, offer it without judgment or comment.
19. Personal items such as wallets, purses and keys should not be touched unless you are asked. A deaf-blind person can handle his or her own money, pay the check independently, open doors without your assistance, etc.

Along this same line of thought, be sure not to move a person’s coat, cane, etc. without first telling him or her. Even if you hang it up, tell the item’s owner where it is, so that when he or she is ready to leave, he or she knows where personal items are and does not have to find you or ask someone to look for them.

20. Do not be offended or discouraged if the deaf-blind person asks to go home or seems to be unenthusiastic about suggested plans. The best of friends are not always welcome. There are times when all of us are exhausted, when we have other plans, when we have chores that must be done, etc.
21. Plan things in advance so your

deaf-blind friend knows what to expect and can plan accordingly. Being deaf and blind may require more organization and planning than being sighted and hearing.

22. Consider everything you say to be a promise and follow through. We often make simple statements which are really promises such as “I’ll stop by tomorrow on my way home.” “I’ll be right back.” “I want to come over for dinner sometime.” Sometimes we don’t really mean “tomorrow” but “soon.” Sometimes we already know we can’t do what we say we will, but we wish we could. For someone who cannot drive, has limited access to phone and bus, who has a small circle of friends, a lack of follow-through can be especially disappointing.
23. Respect the deaf-blind person’s privacy and dignity. Do not ask personal questions unless you are close friends. Do not pass on information you may know about him or her without his or her knowledge and permission.

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VIRGINIA DD NETWORK NEWS

Supporting Virginians with Disabilities in Their Communities

Fred Orelove

The past quarter century has seen a widespread shift in this country from institutional to community provision of services to individuals with disabilities.¹ Nationally, there was a 59% decrease in public and private institution residents between 1982 and 2002, accompanied by a 696% increase in community residences housing six or fewer people.² Despite national fiscal and demographic trends, including increased federal-state cost sharing, rising numbers of people with developmental disabilities receiving Home and Community Based waiver services funding, and improved awareness of *Olmstead*, there continues to be wide variation among states in fiscal effort, services received, and progress towards deinstitutionalization.

How does Virginia stack up? Like other states, Virginia has downsized its institutions. As of 2002, there were 1,619 individuals residing in Virginia's state-operated MR/DD institutions³ and 1,012 individuals with MR/DD were residing in nursing facilities. Unlike 36 other states, however, which have closed one or more state-operated institutions, Virginia's facilities all remain open – with the annual cost of care per resident at \$115,822 in 2002.³

At the same time, while utilization rates (per 100,000 of state general population) in community residences for 1 to 15 persons in 2002 averaged 123, Virginia's rate was 54, placing the state 47th nationally. Virginia ranked 49th in terms of small (1-6 persons) publicly funded residences. Looking at the percentage of MR/DD spending allocated for all community services (including residential settings for 6 or fewer per-

sons, related day programs, and individual and family support), Virginia's percentage is 48%, for a ranking of 50th nationally.³

According to Stancliffe and Lakin², "available studies of costs and outcomes of deinstitutionalization reveal a consistent pattern across states and over time of better outcomes and lower costs in the community." The issue, however, is not whether institutional or community services are cheaper, but which array of services and supports yields the best outcomes.⁴ Regardless of the cost-comparison data, the evidence that community services result in better outcomes than institutions is clear and compelling.⁵

The future of Virginians with disabilities and their families will continue to be determined in large part by elected officials. As many other states have determined, as institutional census continues to fall and average daily costs increase, it becomes increasingly difficult to justify maintaining a dual system, from an economic standpoint alone, let alone from a moral or legal perspective. It will be important to see if Virginia can catch up to its peers in supporting this vital group of citizens.

The DD Network Partner agencies include: the Virginia Board for People with Disabilities (Heidi Lawyer, Director), Virginia Office for Protection and Advocacy, (Colleen Miller, Executive Director), Partnership for People with Disabilities (Fred Orelove, Director).

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ADA QUESTIONS AND ANSWERS



The Americans with Disabilities Act was hailed as “landmark” legislation when it passed in 1990, but today the law is still often poorly understood. With this regular column, VOPA hopes to help all of us to understand this far-reaching civil rights law.

Q: Does the ADA apply to all businesses?

A: No, but it applies to a lot of them. The employment rules of the ADA apply to all businesses that employ 15 or more people. The public accommodations rules – requiring access for customers with disabilities – apply to a long list of private businesses, including restaurants, hotels, theaters, doctor’s offices, pharmacies, day care centers, parks, private schools, retail stores, and museums. The ADA also applies to state and local governments and to telecommunications services.

Q: Do all buildings have to be fully accessible?

A: Commercial buildings and places of public accommodation built after 1992 must be fully accessible. Older buildings have to remove any barriers to access that can be removed on a “readily achievable” basis. This means that they must remove all obstacles that are easy and inexpensive to remove. Whether something is inexpensive to remove depends on the resources of the business involved.

Q: What if it isn’t readily achievable to remove obstacles?

A: If a barrier to access can not be removed easily and inexpensively, the business still has to provide services to people with disabilities some other way. For example, if it is too expensive to build a ramp into a store, the business may need to come out to the curb to serve someone in a wheelchair.

Q: Does the ADA require sign language interpreters?

A: Not exactly. The ADA requires places of public accommodation to ensure “effective communication.” In many situations and for many people who are deaf, that will mean a sign language interpreter. However, in some situations, especially where the communication is not very complex, other means like writing notes may provide “effective communications.”

Q: Do restaurants have to have Braille menus?

A: Some restaurants have chosen to offer Braille menus, but they are not required if a waiter or other staff is available to read the menu to a blind patron.

LETTER OF APPRECIATION For Faye Adams, Disability Rights Advocate

Kevin Townsend
Sandhill Drive
Cape Charles, Virginia 23310

September 25, 2003

In reply to: FAYE ADAMS
Disability Rights Advocate

VIRGINIA OFFICE FOR PROTECTION AND ADVOCACY
COMMONWEALTH OF VA

DEAR MS. ADAMS;

I wanted to take this time to write and thank you and your staff in the Virginia Beach office for the support of the advocacy issues in August with DRS. Your assisting brought closure to the situation with DRS and I feel satisfied with the outcome as stated in {letter-September 17,2003} to Mrs. Lutenhous, Appeals Coordinator.

Again, it was a pleasure to have the hard work and forthright approach of your assistance during my informal mediation with the Department of Rehabilitation on the Eastern Shore.

Your assistance was much appreciated.

Sincerely,

Kevin Townsend

(Reprinted with permission)

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Advocacy for Individuals with Mental Illness (PAIMI) Advisory Council and the Disabilities Advisory Council (DAC) gave extensive input on the objectives, as well. Additionally, the Councils served as practice "focus groups" for us and gave us feedback on our approach prior to the actual focus groups in the community. In our continuing effort to improve the input process, we have asked for feedback from the focus groups themselves about the effectiveness of this type of forum. So far, the responses have been positive. The result is an impressive work plan of focus areas and objectives which should use VOPA's resources to the fullest, and should make a real difference in the lives of Virginians with disabilities.

Of course, we always welcome comments from anyone. Comments may be provided to VOPA by telephone at (804) 225-2042 or (800) 552-3962 (both voice/TTY), by e-mail at general.vopa@vopa.virginia.gov, or in writing to 1910 Byrd Avenue, Suite 5, Richmond, VA 23230.

Virginia Youth Leadership Forum Seeks Candidates

The Virginia Board for People with Disabilities (VBPD) is pleased to announce its search for candidates to attend the 2005 Virginia Youth Leadership Forum (YLF) in Newport News. The sixth annual forum will be hosted at Christopher Newport University from July 11 –15, 2005. Twenty-five high school students from across Virginia will be selected to participate in this outstanding leadership development program.

Sponsored by the VBPD, the forum's goal is to help students learn about the principles of leadership, how to become effective leaders, choose careers, and build self-confidence. This is a rewarding and exciting opportunity for students with disabilities. We strongly encourage young people across the state to recognize the unique honor of being chosen as a YLF delegate and to apply by the **February 25, 2005 deadline**.

Application packets for the forum have been mailed to school districts and to disability-related organizations throughout Virginia. **Rising juniors and seniors** with disabilities who are leaders in their school, community, faith, or other environment are encouraged to apply. There is no charge to delegates chosen to participate in this program and reasonable accommodations needed for full participation are provided by the Board. Late applications cannot be considered.

To obtain an application or for more information, contact Jennifer Peers or Teri Morgan at 800-846-4464 voice/TTY or you may email your inquiry to jennifer.peers@vbpd.virginia.gov. Information and applications can also be downloaded off the Virginia Board for People with Disabilities website at www.vaboard.org.



POLICY INTERNSHIPS AVAILABLE

The Virginia Board for People with Disabilities is pleased to announce the availability of paid internship opportunities for college students in the Richmond metro area in the Spring and Fall of 2005. The internships will provide full and part time college students with paid work experiences in an agency directly involved in policy, planning, research, and program development aimed at improving services and enhancing community inclusion for people with disabilities in Virginia. The Board, through its numerous initiatives:

- Coordinates with agencies that provide services
- Monitors and develops programs that serve disability stakeholders
- Influences policies and regulations that govern and impact the service system
- Evaluates program outcomes, assesses needs, and identifies barriers to services, and
- Develops strategies for improving systems at local and statewide levels.

The Disability Internship Program seeks to provide direct, hands-on work/study experiences as well as opportunities for advanced scholarship in the field of disability studies. The goal of the Disability Internship Program is to promote awareness about services available in Virginia for people with disabilities and to educate college students about careers and opportunities available in the disability services sector.

Eligibility:

The Disability Internship is open to full and part-time undergraduate and graduate students enrolled in four-year accredited colleges and universities in Virginia. Interns will need to provide proof of enrollment during the semester of their internship. Typically, candidates are pursuing academic studies in the following areas: allied health, social work, public administration, education, or related disciplines. Eligible students will be within two years of graduation from the program in which they are enrolled. Successful applicants will have a minimum 3.0 cumulative grade point average (GPA) on a 4.0 scale and will submit all application materials within prescribed timeframes as described below.

Availability and Logistics:

Two paid, 10-week long Disability Internships will be available in 2005—one in the Spring semester and one in the Fall semester. Recruitment schedules, deadlines, and internship dates are listed below.

Interns work a minimum of 15 hours per week (maximum of 30 hours per week) at the Board's offices (Ninth Street Office Building, Richmond, VA) during each internship interval. Interns are paid \$15.00 per hour and are supervised by the Director of Policy, Research and Evaluation.

Internship duties are based on the program's goals: to educate and provide practical work experiences; to assist in accomplishing the Board's priorities; and to promote working knowledge in each interns' expressed areas of interests such as research, evaluation, analysis and/or study. Duties will be assigned based on the students' work and scholarly experience, academic requirements, career development goals, and the Board's long-term critical business needs.

Desk, office space, computer equipment, and supplies are provided by the Board. Parking arrangements may be made on an ad hoc basis. Work schedules and absences will be established through agreement with the Internship Program Director. Overtime is not applicable and the program does not offer health or any other benefits.

Application Information:

To be considered for the internship applicants must submit:

COVER LETTER stating the applicant's qualifications as well as his/her intent and reasons for applying for the internship
RESUME (or CV),

TRANSCRIPT* of undergraduate and any completed graduate work, including the grade point average.

*The transcript sent with the application may be an unofficial copy but, if the applicant is selected for the internship, an official copy of the transcripts must be submitted within 5 working days following written acceptance into the program.

REFERENCE LETTERS (2): One from a faculty member in the school in which the applicant is currently enrolled and one from an individual (non-family member) who knows the applicant either personally or professionally.

2005 Application Deadlines and Internship Schedule:

Spring Internship

Application Deadline -- January 7, 2005

Internship starts February 14, 2005 and ends April 22, 2005

Fall Internship

Application Deadline -- August 15, 2005

Internship starts September 12, 2005 and ends November 18, 2005

Application materials should be sent to:

Director, Policy, Research and Evaluation
Virginia Board for People with Disabilities
202 North Ninth Street, 9th Floor
Richmond, Virginia 23219
Attn: Barbara J. Ettner, Ph.D.
ettnerbj@vbpd.state.va.us
804-786-7333

1910 Byrd Avenue, Suite 5
Richmond, VA 23230



VOPA

Virginia's Protection and
Advocacy System Serving
Persons with Disabilities

**Commonwealth of Virginia
Virginia Office for Protection
and Advocacy
1-800-552-3962**

We're on the Web!
www.vopa.state.va.us

NEWSLETTER INFORMATION—We are trying to reduce the distribution of hard copies of the newsletter, due to the high cost of production and mailing. We ask that anyone with internet access, please consider opting to view the newsletter on our website at www.vopa.state.va.us. Our newsletter is normally produced on a quarterly basis—spring, summer, fall and winter. Please notify us if you no longer wish to receive the newsletter by U.S. mail, by e-mailing us at general.vopa@vopa.state.va.us.

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